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Care coordination: Summary of interviews and discussion of strategies

ISSUE: How can the fee-for-service Medicare program support and encourage care coordination?

KEY POINTS: One of the barriers to quality and efficiency in FFS Medicare is the lack of incentives for care coordination. To learn more about best practices in care coordination, MedPAC staff interviewed a wide spectrum of group practices, integrated delivery systems, hospitals, physician organizations, health plans, researchers, quality experts, and CMS demonstration staff. Our interviews focused on care management for patients with complex conditions and care transitions among and within provider settings for all patients. We also discussed organizational structures and incentives that supported their work.

ACTION: The Commission should consider the key findings from the interviews and the three options described in the paper to discuss whether and how Medicare FFS could support these types of programs.

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